PTO/SB/22 (04-07)
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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)<br>FY 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                | (~)          | Docket Number (Optional)<br>140942000900 |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|------------------------------------------|--|
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                | 3)-)         |                                          |  |
| Application Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 10/009,445     | Filed        | May 11, 2000 (Int'l)                     |  |
| For OX2 RECEPTOR HOMOLOGS (AMENDED)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |              |                                          |  |
| Art Unit 1636                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                | Examiner     | C. Qian                                  |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.                                                                                                                                                                                                                                                                                                                                                                                                   |                |              |                                          |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):                                                                                                                                                                                                                                                                                                                                                                                                                          |                |              |                                          |  |
| One month (27 CER 1 17(a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Fee (1))       | Small Entity |                                          |  |
| One month (37 CFR 1.17(a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                | \$60         | \$                                       |  |
| Two months (37 CFR 1.17(a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1)(2)) \$450   | \$225        | \$                                       |  |
| X Three months (37 CFR 1.17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | (a)(3)) \$1020 | \$510        | \$ <u>1,020.00</u>                       |  |
| Four months (37 CFR 1.17(a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | a)(4)) \$1590  | \$795        | \$                                       |  |
| Five months (37 CFR 1.17(a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | (5)) \$2160    | \$1080       | \$                                       |  |
| Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to charge fees in this application to a Deposit Account.  X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number  03-1952  I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate. |                |              |                                          |  |
| l am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number  x attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 51,804 .                                                                                                                                                                                                                                |                |              |                                          |  |
| /Laurie L. Hill/                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |              | August 9, 2007                           |  |
| Signature Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                |              | Date                                     |  |
| Laurie L. Hill                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                |              | (858) 720-7945                           |  |
| Typed or printed name Telephone Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |              |                                          |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                                                                                                                                                                                                                                                                                                                    |                |              |                                          |  |
| X Total of forms are submitted.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |              |                                          |  |